

MINUTES

BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS CORPORATE COMPLIANCE COMMITTEE MEETING

Thursday, November 6, 2025 at 5:00 pm

Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

Committee Members:	Present	Excused	Absent	Committee Members:	Present	Excused	Absent	Others Present:
Patrick Conley, Ch	X	_____	_____	Shelley King	X	_____	_____	BABH: Melissa Prusi, Sarah Holsinger, Christopher Pinter, and Sara McRae Legend: M-Motion; S-Support; MA- Motion Adopted; AB-Abstained
P. Schumacher, V Ch	X	_____	_____	Patrick McFarland, Ex Off	X	_____	_____	
Tim Banaszak	X	_____	_____	Robert Pawlak, Ex Off	X	_____	_____	
Christopher Girard	X	_____	_____					

	Agenda Item	Discussion	Motion/Action
1.	Call to Order & Roll Call	Committee Chair, P. Conley, called the meeting to order at 5:00 pm. All the members were present.	
2.	Public Input (Maximum of 3 Minutes)	There were not any members of the public present.	
3.	Unfinished Business	There was not any unfinished business presented.	
4.	New Business 4.1) Corporate Compliance Report 4.2) Corporate Compliance Committee Notes from the meetings dated: a) June 9, 2025 b) July 14, 2025 c) August 11, 1015	4.1) M. Prusi and S. Holsinger reviewed the corporate compliance report noting the completed network provider site reviews, risk assessments focusing on whistleblower protections and artificial intelligence compliance issues, and email security drills. There were general discussions related to the phone system implementation status, the tracking and training procedure for staff that repeatedly fail the email security drills, and the impacts of artificial intelligence. 4.2) The Committee reviewed the notes.	4.1) No action was necessary 4.2) No action was necessary

	<p>4.3) Security Risk Assessment</p> <p>4.4) MidState Health Network (MSHN) Medicaid Event Verification (MEV) Report</p> <p>4.5) MSHN Quarterly Fraud & Abuse Report</p>	<p>4.3) M. Prusi reviewed the risk assessment noting that BABHA is not in compliance with a few sections including accessing electronic protected health information (PHI), the physical security of devices used to access PHI, and ensuring business associates are securing PHI. M. Prusi also reviewed the remediation plan to bring BABHA into compliance. There were general discussions regarding the security measures used in BABHA facility entryways.</p> <p>4.4) S. Holsinger reported that MSHN performs a MEV review twice per year and reviewed the results from the August 2025 review. A correction plan has been submitted and accepted for the findings. There were general discussions regarding the 74% received and that it is lower than BABHA internal reviews because the MSHN review process has a higher level of scrutiny, the number of findings has decreased compared to the February 2025 review, the sample size of the claims reviewed by MSHN has been reduced recently, and its impact. The Committee requested that leadership provide comparison trend data for the MSHN MEV reviews in the next report.</p> <p>4.5) M. Prusi review the report Office of Inspector General report due to MSHN noting corporate compliance allegations, recoupments from providers, and investigation results that required action. There were general discussions related to the history and transition of PAO to Arnold Center, BABHA's ability to utilize contract action when necessary, dollar amounts in the spreadsheet do not add up correctly from provider to provider, the overall report template, and the Committee's requested changes. Leadership will check the accuracy of the figures in the spreadsheet and add the number of consumers served for each provider for the next report.</p>	<p>4.3) No action was necessary</p> <p>4.4) No action was necessary</p> <p>4.5) No action was necessary</p>
5.	Adjournment	On motion of C. Pinter Girard and support of P. McFarland, the meeting adjourned at 5:57 pm. The motion passed unanimously.	


 Patrick Conley, Committee Chair